SUPPLEMENT
TO THE
BRITISH MEDICAL JOURNAL.

LONDON: SATURDAY, OCTOBER 23RD, 1915.

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INSURANCE.

DEDUCTIONS FROM ACCOUNTS.

Questions in Parliament.

Sir Philip Magnus asked the Chairman of the Joint Committee of Insurance Commissioners, on October 14th, whether the payment of the balance due to medical practitioners from insurance committees could be accelerated. Mr. Dixon asked the reasons which justified the deductions insisted upon by the Insurance Commissioners (England) in Circular I.C/L. 124, of one-third of the quarterly accounts of panel practitioners, chemists, and institutions after services had been rendered and an agreement entered into with each party, why there had been no advance on account nor adjustment of the deductions of 10 per cent. made in the accounts of doctors, chemists, and institutions for the year 1914, and if the Government would instruct the Commissioners to deal with the reductions owing to enlistments upon a less arbitrary and more generous basis by a temporary increase of the Treasury grant, if necessary, considering that the medical profession had undertaken the free treatment of soldiers' wives and families and other dependants, and had lost the most healthy portion of their panel. Mr. C. Roberts, in reply, referred to the answer given by him to Mr. Hancock on July 27th, and added that every effort was being made to overcome the difficulty arising out of the war, to which reference was there made. In his answer on the date mentioned, which was reported in the British Medical Journal of July 31st, p. 189, Mr. Roberts said that the final settlement for 1914 had been unavoidably delayed by certain difficulties arising out of the present state of war. The balance due would be ascertained and paid as soon as practicable. In the case of the chemists, who might otherwise have suffered hardship, steps were taken in April last to effect an emergency settlement, which was now in progress. He did not admit that the deductions owing to enlistments were made upon an arbitrary and ungenerous basis, and could not contemplate the suggestion that a further sum should be provided by the Exchequer.

Where the Shoe Pinches.

A Temporary Lieutenant's Wife writes: Before finally deciding to take a temporary commission my husband and I counted the cost, and although we knew by past experience (my husband having been a civil surgeon in the South African campaign) that the private practice would vanish with his personality, there were still the appointments left, a large share of which was represented by a fairly large panel. Believing in the bait which was held out to medical men to induce them to go on the panel, namely, "the State are always the safest payers," we agreed to face the loss of the private practice (a no small thing in these days of increased cost of living, and children to feed, clothe, and educate), and do that which seemed plainly our duty—my husband applied for a temporary commission, got it, and in due time went to France.

Now, every Saturday morning I pay the locumtenent seven guineas (and keep a good table for him all through the week) and the chauffeur 35s. (it is quite impossible to work this practice without a conveyance); there is also the wages of the two maidservants, the maintenance of the household, the children's school bills, their clothes, rent, rates, upkeep of car, firing, lighting, and so on *ad infinitum*, all of which are cash-down transactions.

Now let us turn to the Insurance Committee and see how they have helped and encouraged in this great national emergency.

For the quarter ending December 30th, 1914, they kept back 50 per cent. of the money due to us, for the quarter ending March 30th last 20 per cent., for the quarter ending June 30th 35 per cent. The foregoing percentages are still retained in spite of many letters to the Insurance Committee asking for a settlement, and I fully expect the same thing will happen for the quarter ending September 30th. Their excuse is that "it takes time to find out what men have joined the forces from each doctor's panel." I dare say it does, but a system or method which cannot "find out" by now is no method or system, but a chaotic muddle. I know pretty well every man who has gone from this district, and I know that it nothing near like warrants the deduction made; in fact, I have sent in fresh acceptances to more than balance those gone. Patriotism is a very fine thing, but it will not pay our bills. Thanks to the Insurance Committee, I am paying my bills now by dipping into our savings. Could not the British Medical Association endeavour to make the Insurance Committee see that they also have a duty to perform—namely, to pay for services faithfully rendered as per the agreement signed and stamped?

Enter the Money-lender.

It was generally said and believed at the time when the Insurance Act was coming into force that it would have many effects which nobody could then foresee. Among the high lights in the rosy picture drawn by its friends of its effect upon the income of doctors was not included, so far as we recollect, the encouragement of money-lenders. A correspondent, however, sends us a neatly typewritten letter he received last week, which would appear to have been widely distributed in London. The writer of this letter states that, being aware that the Insurance Commissioners have reduced the amount payable to panel doctors, he is making a speciality of substantial advances to doctors on very reasonable terms. He does not charge money-lenders' rates, and invites a call or 'phone from the doctor addressed, should he be in temporary need of financial assistance. Milton imagined a place of which the denizens

> feel by turns the bitter change
> From beds of raging fire to starve in ice
> . . . and there to pine
> Immovable, infixed, and frozen round
> Periods of time.

On the whole, it will probably be found a lesser evil to be infixed and frozen round by an Insurance Committee for a period of time than to enter the fiery furnace of the money-lender.

PROPOSED AMALGAMATION OF INSURANCE COMMISSIONS.

The proposal, which, as was mentioned last week, is attributed to the Retrenchment Committee, for the amalgamation of the Scottish and Welsh Insurance Commissions

with the English Insurance Commission, is exciting much opposition in Scotland.

At a meeting of the Edinburgh and Leith Division held on October 15th, Dr. W. Stewart, chairman of the Division, presiding, a circular was read from the Scottish Committee stating that it was understood that the Parliamentary Retrenchment Committee had suggested that the Scottish Insurance Commission should be abolished. The Division unanimously passed resolutions "to oppose strongly the transference of the Scottish Insurance Commission to London," and "that the amalgamation of several small Insurance Commissions into one Central Commission must be deprecated chiefly on the ground of loss of local interest in the administration of medical benefit." The Senior Secretary was instructed to send copies of these resolutions to local members of Parliament and others.

At the monthly meeting of the Leith Burgh Insurance Committee a resolution was adopted, submitted from the meeting of the chairman, vice-chairman, conveners of subcommittees, and representatives of the doctors and chemists, declaring that the proposed amalgamation should be opposed on the ground that experience had justified the wisdom of the constitution of a separate commission for Scotland, and that administration from a centralized office in London would lead to loss of efficiency prejudicial to insured persons, without any adequate compensation in economy.

The Executive Committee of the Scottish Association of Insurance Committees is to consider the proposal at a meeting at Dundee on October 30th. Judging from the reference to the matter in its report the Committee is opposed to the suggestion. It is urged that the abolition of the Scottish Commission would not result in any substantial saving, for even if all the members of the Commission were displaced, the staff—both indoor and outdoor—would not be diminished in number, as was clear from the fact that the cost of the Scottish staff was in proportion to population, and, having regard to the extent and character of the area administered, no higher than in England, and less than half that in Ireland. The Midlothian Insurance Committee has adopted unanimously a resolution maintaining that in the interest of the insured population of Scotland and of efficiency and economy of administration, the Scottish Insurance Commissioners should be continued with unimpaired powers, and protesting against any attempt to reopen the question settled by the compromise of 1913.

The General Council of Panel Chemists (Scotland), at a meeting on October 15th, approved the decision of the Pharmaceutical Standing Committee (Scotland) to offer an uncompromising opposition to what it described as the retrograde proposal for the abolition of the Scottish Commission and the centralization of the insurance administration in London.

The Edinburgh district of the Ancient Order of Foresters at its forty-fifth annual meeting adopted a resolution stating that it viewed with alarm the proposed transfer of the Scottish Commission to London, and calling upon the Scottish members of Parliament to resist such transfer as being detrimental to the best interests of Scotland. Meanwhile the unofficial Liberal members of Parliament, at a meeting in the House of Commons on October 14th, adopted the following resolution:

> That in view of the widespread belief in Scotland that a proposal for the abolition of the Scottish Insurance Commission is in contemplation, the Scottish unofficial Liberal members are glad to know that such a proposal has not been considered by the Committee on retrenchment of public expenditure. In the event of any such proposal being made from any quarter, they will feel bound to meet it with strenuous opposition.

LIMITATION OF RIGHT OF TRANSFER OF INSURED PATIENTS OF A PRACTITIONER ABSENT ON MILITARY SERVICE.

There was an error in the title and introduction to the copy of the Medical Benefit Regulations, 1915 (Supplement, October 16th, p. 159), in which it was inadvertently stated that they applied to soldiers returning to civil life. As will have been seen from the text, they refer to the insured patients of doctors on active service. They require that an insured person whose name is on the list of a practitioner on the panel on November 30th, 1915, such practitioner being absent on military service, shall not be entitled to select another practitioner at the end of the medical year, December 31st, 1915, unless he satisfies the Medical Service Subcommittee that he has reasonable grounds for desiring to be removed from the list of the absent practitioner. A practitioner absent on military service is defined as meaning any practitioner on the panel who by reason of his serving with the naval or military forces of the Crown is unable to practise, whether under his agreement with the Committee or otherwise, within the area in which he has undertaken treatment.

THE PROPOSED COMMERCIAL DRUG TARIFF.

Opposition by Scottish Chemists.

At a largely attended meeting of the General Council of Panel Chemists (Scotland) at the Pharmaceutical Society's House, Edinburgh, on October 15th, resolutions were adopted refusing to undertake pharmaceutical service under the Insurance Acts on the terms of the drug tariff as framed by the Departmental Committee, on the ground that it was financially unsound and that its application to about 5,000 consecutive insurance prescriptions indicated a reduction of about 20 per cent. on present drug tariff rates. While not objecting to the general principles that the remuneration should be based on the cost price of material, with allowance for establishment charges and a dispensing fee, the opinion was expressed that the proposed average amount, namely, 0.8d., was quite inadequate in existing war conditions; in view of the limited time available, Scottish panel chemists were recommended to continue the existing arrangements, with satisfactory adjustment of prices, for 1916.

INSURANCE ACT IN PARLIAMENT.

Welsh Insurance Commission.

Mr. Ellis Davies asked on October 14th whether it was contemplated to abolish the Welsh Insurance Commission, and, if so, on what grounds, and on whose suggestion was the decision of Parliament to be reversed. Mr. C. Roberts, Chairman of the Joint Committee of Insurance Commissioners, said he had nothing to add to the reply given by the Prime Minister on September 29th, when it was stated that the organization of the department as a whole was under consideration by the Retrenchment Committee; no statement could be made until the report of the Committee has been received.

Small Panels.

On October 19th Mr. Currie asked whether cases existed in England and Scotland of panel doctors whose panel consists of less than half a dozen persons; what total remuneration was payable to such doctors; whether his attention had been drawn to the case of a panel doctor in Edinburgh who received £76 14s. 2d. sterling for the solitary patient on his panel who required no medical attendance whatever from one end of the year to the other; whether the amount paid to this doctor was in any way subject to the control or discretion of the Commissioners in Scotland, or whether under the Act they had no option but to sanction the payment. Mr. C. Roberts said that such cases as were referred to in the first part of the question no doubt existed, though he had no precise information on the point. The remuneration of a doctor under the capitation system was governed by the terms of his agreement with the Insurance Committee, and included not only his liability in respect of the persons actually on his list, but also the responsibility which he undertook in common with other doctors on the panel for giving treatment to persons who had not selected a doctor for themselves. The payment made in the specific case referred to under the agreement entered into at the beginning of the year covered this liability.

LOCAL MEDICAL AND PANEL COMMITTEES.

Renfrewshire.

At a meeting of the Renfrewshire Panel Committee on September 22nd it was decided to ask the Insurance Committee (1) to continue for 1915 the arrangement for 1914 whereby the whole of the Practitioners' Fund was divided among practitioners in proportion to the number of insured persons upon their lists at the commencement of each quarter; and (2) to see that no permanent reduction was made from the payments due to practitioners in

respect of any failure to submit records for 1914 due to their absence on active service.

With regard to the proposed commercial drug tariff, it was decided to oppose any alteration which would expose the Practitioners' Fund to the risk of being charged to any extent with the cost of drugs.

LANARKSHIRE.

At a meeting of the Local Medical and Panel Committees for the county of Lanark on September 22nd, a scheme for the distribution of the balance of the Medical Fund, and for arrangements for enabling insured persons to be assigned to practitioners on the line of last year's resolution was approved, and it was resolved to recommend the Commissioners that the scheme for recompensing doctors for attending temporary residents should have regard to and meet the expenses of any mileage involved.

The Secretary of the Insurance Committee reported that payment for the quarter of 1s. 4d. for medical attendance and 3½d. for medicine would be made, but that as the deduction of 5,000 for enlistments was believed to be inadequate the final accounting would yet fall to be made.

With regard to discharged soldiers, it was suggested that when restored to a doctor's list an intimation should be placed on the medical card to the effect that the holder had been restored, and would remain on the doctor's list unless intimation of objection was received within a week.

WEST RIDING OF YORKSHIRE.

A meeting of the Local Medical Committee and Panel Committee was held on October 8th, when a resolution was adopted expressing the opinion that the Drug Tariff ought to be revised, but that the 7s. derived from the Medical Benefit Fund and belonging to the doctors must not under any circumstances be encroached upon in the payment of the pharmacists' accounts.

During the temporary absence of Dr. Eardley on military service, the secretarial work will be carried on by his deputy, Mr. Cyril R. Townend, A.C.A., Carlisle Chambers, Goole.

THE WAR EMERGENCY.

SOUTH ESSEX DIVISION.

DR. JOHN WALKER, Honorary Secretary of the South Essex Division and Local War Emergency Committee, has compiled a statement showing the response of the profession in the district to the appeal of the army:

South Essex Division:

Total number of members and non-members		114
Members and non-members who have joined	29	
Number over military age	48	
Women	2	
Rejected for physical reasons	1	
Doctors who have left the Division	3	83
		31

Of the 31 thus shown to be possibly eligible 3 do not practise, 1 is the medical officer of health whom the Local Government Board decline to set free, and 1 is a woman. This appears to leave 26, and in two instances the doctors have allowed their partners to go, so that they may be said to be represented by them in the army.

Dr. Walker also gives separately the statistics for the County Borough of Southend-on-Sea as follows:

County Borough of Southend-on-Sea:

Total number of men in practice		47
Doctors who have joined	13	
Doctors over military age	18	31
Of these 16 left—		16
One is M.O.H.	1	
Two have sent their partners	2	3
		13

Thus leaving 13 possibles.

EDINBURGH AND LEITH DIVISION.

A MEETING of the Edinburgh and Leith Division was held on October 15th, when Dr. W. STEWART, Chairman of the Division, presided.

Dr. STEVENS, the Secretary of the Edinburgh and Leith Medical War Committee, gave an account of the work done for medical recruiting, and mentioned that the number apportioned to this Division by the Scottish Medical Service Emergency Committee had been provided, including the August and September contingents, and that there was every probability of obtaining the final contingent for October. The Senior Secretary and Treasurer was given general powers to deal with the expenses of the Edinburgh and Leith Medical Emergency and the Edinburgh and Leith Medical War Committees. It was agreed to call an early meeting of the Edinburgh and Leith Medical Emergency Committee to consider grievances arising from the gratuitous treatment of dependants of men serving with the colours, and to make representations to the Soldiers' and Sailors' Families Association.

Meetings of Branches and Divisions.

ABERDEEN BRANCH.

THE annual meeting of the Branch was held on October 15th, when Sir ALEXANDER OGSTON, K.C.V.O., President, occupied the chair. The report of the Branch Council for the previous year, which was read and approved, gave a summary of the various meetings held during the year which were mainly connected with war emergency work and the formation of a Bureau Committee and a Local War Committee. The Treasurer's report, having been circulated, was taken as read and approved.

It was decided that owing to present war conditions the office-bearers be re-elected for another year as follows:

President: Sir Alexander Ogston, K.C.V.O., M.D.
President-elect: L. B. Beddie, M.B., Fraserburgh.
Vice-Presidents: John Gordon, M.D., Aberdeen, and C. C. Greig, M.B., Fyvie.
Honorary Secretaries: Thomas Fraser, M.B., and F. K. Smith, M.B., Aberdeen.
Honorary Treasurer: J. R. Levack, M.B., Aberdeen.
Representatives on Council of Association: John Gordon, M.D., Aberdeen, and J. Munro Moir, M.D., Inverness.
Branch Council: L. B. Beddie, M.B., A. T. Gordon Beveridge, M.D., R. Bruce, M.D., J. F. McIntosh, M.B., R. Rannie, M.B., G. Sinclair, M.D., J. F. Robertson, M.D., George Williamson, M.B., and J. D. Wyness, M.D.

The revised ethical rules governing procedure of a Branch were considered, and the meeting unanimously agreed to adopt them.

Dr. GORDON gave a short report of the work of the Bureau Committee, and pointed out how great an advantage it had been in Aberdeen during the last five months.

Association Notices.

STAFFORDSHIRE BRANCH.—Dr. Harold Hartley, Honorary General Secretary, Basford, Stoke-on-Trent, gives notice that the first general meeting of the session will be held at the North Stafford Hotel, Stoke-on-Trent, on Thursday, November 18th. The President, Dr. F. M. Rowland, will take the chair at 4 p.m. Business:—Resolution: That the Staffordshire Branch hereby adopts the revised rules governing procedure in ethical matters of a Branch composed of several Divisions as approved by the Annual Representative Meeting, 1915, without modification and in substitution for any ethical rules now in use by the said Branch. Exhibition of living cases. Papers:—W. Mitchell Smith: Alimentary Hygiene in Children. G. A. Carter: Nose Bleeding. S. McMurray and E. E. Young: A Case of Intracranial New Growth simulating Miners' Nystagmus. Exhibition of pathological specimens, etc. Dinner at 6.15 p.m. Charge, 5s.

Naval and Military Appointments.

ROYAL NAVAL MEDICAL SERVICE.

THE following appointments are announced by the Admiralty: Fleet Surgeons O. Rees, M.D., to the *Dominion*, vice Cock; C. J. E. Cock to the *Powerful*, vice Rees; F. A. Cappa to the *Defence*, vice Durston; J. C. Durston to the *Colleen*, additional, for Haulbowline and Dockyard; C. B. Fairbank to the *Centurion*, vice Gill; H. H. Gill to the *Vivid*, additional, for disposal; G. G. Borrett to the *Pembroke*, additional, for disposal; F. F. Mahon to the *Achilles*, vice Borrett. Staff Surgeons A. R. Schofield, M.B., to the *Southampton*, vice McCloy; A. McCloy to the *Hecla*, vice Fairbank; G. G. Vickery, M.B., to the *Vivid*, additional, for disposal. Temporary Surgeons A. T. McDonald to the *Warrior*, vice Scott; A. D. E. Bayliss, M.D., to the *Pembroke*, additional, for disposal. To be temporary Surgeons: A. C. Barker, M.B., H. C. C. Veitch, A. R. S. Warden, G. Lifico, M.B.

ROYAL NAVAL VOLUNTEER RESERVE.

Surgeon Probationer R. P. Smith to the *Oak*.

ARMY MEDICAL SERVICE.

ROYAL ARMY MEDICAL CORPS.

Temporary Major L. H. Guest relinquishes his commission.

Captain B. A. Odlum from seconded list is restored to the establishment.

The name of temporary Captain Edward Emrys-Roberts is as now stated, and not as stated in the *London Gazette* of April 12th.

To be temporary Captains: C. E. Lea, M.D., J. G. Milne, M.B., R. H.

Strong, M.B., J. Whigham, M.B., A. H. Carter, M.D., T. G. Lusk, M.B., late Captain, R.A.M.C.(T.F.), J. A. Arkwright, M.D.

Temporary Lieutenants to be temporary Captains: E. A. Gates, M.D., R. P. Nash, E. Martyn-Clarke, W. E. K. Coles, D. Lawrie, M.D.

To be temporary Lieutenants: H. W. Pigeon, M.D., A. H. Coleman, M.B., A. R. Hobbs, M.D., P. Rendall, M.D., D. J. McAfee, M.D., A. G. Faulds, M.B., G. Coats, C. Robertson, M.B., A. G. Bisset, M.B., E. G. Evans, E. Bromley, M.B., F. R. Snell, M.B., E. A. Pywell, A. L. Robinson, H. A. Hutt, C. B. Gervis, M.D., A. C. Falkiner, M.B., M. Polson, M.B., R. Felton, M.D., N. McFarlane, M.B., M. Eager, E. Brown, H. H. Stones, M.B., V. M. Fisher, M.B., W. Millerick, D. F. Macdonald, M.B., R. A. Fawcus, M.B., S. R. Lane, M.D., G. L. Parsons, F. Dillon, M.B., J. A. Brown, M.D., H. M. Robertson, M.B., J. Gardner, M.B., J. Menzies, M.B., A. Benjamin, M.B., S. A. McSwiney, M.B., E. F. Milton, M.D., L. W. Crowe M.D., W. C. Downs, M.B., W. H. Anderson, M.D., W. A. Clayton, N. M. Gavin, F.R.C.S.E., F. L. Brown, M.D., W. E. Bracey, D. R. Campbell, M.D., A. MacIntyre, M.B., E. G. D. Milsom, H. W. Nott, W. Somerville, M.D., J. F. Blackett, M.D., W. G. Macdonald, M.B., J. G. Ivers, J. P. E. Henery, J. MacD. Lang, M.B., G. W. Riddel, M.B., F. N. Brown, A. Budd, M.B., N. F. Lock, M.B., F.R.C.S., H. Young, M.B., T. E. Malvany, L. R. Thomson, M.B., B. A. Cheadle, M.B., E. W. L. Sharp, A. F. G. Kerr, M.D., C. E. Meryon, G. G. Bruce, M.B., J. G. Castellain, A. C. West, M.B., R. C. MacQueen, M.B., F.R.C.S., J. G. S. Mennie, M.B., E. H. Sheehan, M.B., A. B. MacLean, M.B., F. G. Hopkins, M.D., B. C. Scott, W. H. Rayner, N. McGowan, D. Dunlop, M.B., G. B. Hanna, D. Welsh, P. McDougall, M.B.

The name of temporary Lieutenant James Philp is as now described, and not as stated in the *London Gazette* of September 20th.

Vacancies and Appointments.

NOTICES REGARDING APPOINTMENTS.—Attention is called to a Notice (see Index to Advertisements—Important Notice re Appointments) appearing in our advertisement columns, giving particulars of vacancies as to which inquiries should be made before application.

VACANCIES.

BOURNEMOUTH: ROYAL NATIONAL SANATORIUM FOR CONSUMPTION AND DISEASES OF THE CHEST. — Resident Medical Officer and Clinical Tuberculosis Officer. Salary, £300 per annum, rising to £400, with additional £130 for the latter post.

BRISTOL ROYAL HOSPITAL FOR SICK CHILDREN AND WOMEN.—Junior Resident Officer as House-Physician. Salary, £150 per annum.

BRISTOL ROYAL INFIRMARY.—(1) House-Physicians. (2) House-Surgeons. (3) Dental House-Surgeon. Salary, £120 per annum in each case.

BURNLEY: VICTORIA HOSPITAL.—House-Surgeon. Salary, £135 per annum.

DEWSBURY EDUCATION COMMITTEE.—Temporary Assistant School Medical Officer. Salary, £300 per annum.

DUDLEY: GUEST HOSPITAL.—Senior Resident Medical Officer. Salary, £150 per annum.

GLAMORGAN COUNTY ASYLUM, Bridgend.—Assistant Medical Officer. Salary, £250 per annum.

GLASGOW UNIVERSITY.—Additional Examiner in (1) Medical Jurisprudence and Public Health; (2) Public Health Laboratory Work; (3) Vital Statistics, Sanitary Law, etc.; (4) Midwifery.

HAMMERSMITH PARISH.—Second Assistant Medical Officer for Infirmary and Workhouse. Salary, £170 per annum, increasing to £190.

HOSPITAL FOR CONSUMPTION AND DISEASES OF THE CHEST, Brompton.—(1) Assistant Resident Medical Officer; salary, £100 per annum. (2) House-Physician for six months; honorarium, 30 guineas.

HOSPITAL FOR WOMEN, Soho Square, W.—Resident Medical Officer. Salary, £80 per annum.

KING EDWARD VII WELSH NATIONAL MEMORIAL ASSOCIATION.—(1) Assistant Resident Medical Officer at Glan Ely Tuberculosis Hospital; (2) Assistant Tuberculosis Physician at Highfield Tuberculosis Hospital. Salary in each case, £250 per annum.

LEEDS PUBLIC DISPENSARY.—Lady Resident Medical Officer. Salary, £130 per annum.

MANCHESTER CHILDREN'S HOSPITAL.—Resident Medical Officer. Salary, £100 per annum and bonus of £3 per month during the war.

NEWCASTLE-UPON-TYNE PARISH.—Resident Assistant Medical Officer for the Infirmary. Salary, £250 per annum, rising to £300.

NEWCASTLE-UPON-TYNE: ROYAL VICTORIA INFIRMARY.—(1) Four House-Physicians; (2) Four House-Surgeons; (3) Accident Room House-Surgeon; (4) House-Surgeon to Aural and Ophthalmic Department; (5) House-Surgeon to Skin and Gynaecological Department; (6) House-Surgeon to Out-patient Dressing Department.

NEW HOSPITAL FOR WOMEN, Euston Road, N.W.—(1) Temporary Assistant Surgeon; (2) Obstetric Assistant; (3) Resident Medical Officer at House of Recovery, New Barnet.

PUTNEY HOSPITAL, S.W.—Resident Medical Officer. Salary, £150 per annum.

QUEEN'S HOSPITAL FOR CHILDREN, Hackney Road, E.—(1) House-Surgeon; salary, £100 per annum. (2) Temporary Surgeon in charge of Ear, Nose, and Throat Department; honorarium, £25 per annum.

ROYAL LONDON OPHTHALMIC HOSPITAL, City Road, E.C.—Senior House-Surgeon. Salary, £100 per annum.

SAMARITAN FREE HOSPITAL, Marylebone Road, N.W.—Two Anaesthetists. Honorarium, £15 per annum.

SHEFFIELD ROYAL INFIRMARY.—House-Surgeon. Salary, £150 per annum.

SHETLAND; WHALSAY PARISH.—Medical Practitioner. Guaranteed income £300 by the Highlands and Islands (Medical Service) Board.

SHREWSBURY: ROYAL SALOP INFIRMARY.—House-Physician. Salary, £120 per annum.

SOUTHAMPTON COUNTY BOROUGH.—Assistant Medical Officer of Health. Salary, £300 per annum.

SOUTHAMPTON: FREE EYE HOSPITAL.—House-Surgeon. Salary, £100 per annum.

SOUTHAMPTON: ROYAL SOUTH HANTS AND SOUTHAMPTON HOSPITAL.—Junior House-Surgeon. Salary, £120 per annum.

SUNDERLAND: MONKWEARMOUTH AND SOUTHWICK HOSPITAL.—House-Surgeon. Salary, £150 per annum.

SUNDERLAND: ROYAL INFIRMARY CHILDREN'S HOSPITAL.—Resident Medical Officer (female).

WARRINGTON INFIRMARY AND DISPENSARY.—Junior House-Surgeon. Salary, £120 per annum.

WARRINGTON: LORD DERBY WAR HOSPITAL.—Resident Surgeons and Physicians. Pay, £1 per diem.

WELSH METROPOLITAN WAR HOSPITAL, Whitchurch.—Junior Surgeon.

WESTMORLAND SANATORIUM, Meathop.—Second Assistant. Salary, £200 per annum.

WEST HAM AND EASTERN GENERAL HOSPITAL, Stratford.—House-Physicians and House-Surgeons. Salary, £120 and £100 per annum respectively.

WIGAN: ROYAL ALBERT EDWARD INFIRMARY AND DISPENSARY.—Lady House-Surgeon. Salary, £150 per annum.

WORCESTER GENERAL INFIRMARY.—Resident Medical Officer Salary, £150 per annum.

YORK COUNTY HOSPITAL.—Resident Medical Officer. Salary, £150 per annum.

CERTIFYING FACTORY SURGEONS.—The Chief Inspector of Factories announces the following vacant appointment: Ballindalloch (Banff)

To ensure notice in this column—which is compiled from our advertisement columns, where full particulars will be found—it is necessary that advertisements should be received not later than the first post on Wednesday morning. Persons interested should refer also to the Index to Advertisements which follows the Table of Contents in the JOURNAL.

APPOINTMENTS.

SMAILES, W. H., M.D.Lond., District Medical Officer of the Huddersfield Union.

WILSON, T. N., M.B., C.M.Edin., Certifying Factory Surgeon for the Market Bosworth District, co. Leicester.

BIRTHS, MARRIAGES, AND DEATHS.

The charge for inserting announcements of Births, Marriages, and Deaths is 5s., *which sum should be forwarded in Post Office Orders or Stamps with the notice not later than the first post on Wednesday morning in order to ensure insertion in the current issue.*

MARRIAGES.

BABST—PEARSE.—At Christ Church, Dunston (by special licence), on October 16th, by the Rev. J. W. D. McIntosh (vicar), Captain Edgar Babst, M.B., B.S., R.A.M.C.(T.F.), son of Dr. Babst, Willington Quay-on-Tyne, to Laura, daughter of Mrs. Hescott, Auckland, New Zealand, and the late W. S. Pearse, Esq., Canterbury, New Zealand.

FISHER—EPPS.—On the 18th instant, at the Church of St. Jude-on-the-Hill, Hampstead Garden Suburb, by the Rev. Walter Bancroft, M.A., Robert Hankinson Williams Fisher, M.A., D.P.H., eldest son of Dr. Thomas Fisher, J.P., of Great Eccleston, Lancs., to Frances Nina Epps, second daughter of the late Dr. Washington Epps, of Queen Anne Street, W.

LAPAGE—MACDONALD.—On September 1st, at St. Chrysostom's, Victoria Park, Manchester, by the Rev. M. J. Ransome, assisted by the Rev. H. A. Ransome (uncles of the bride), and the Rev. C. R. P. Muir (rector), Charles Paget, eldest son of Dr. and Mrs. Lapage, of Nantwich, to Hilda, only daughter of the late Dr. Macdonald, of Kirkoswald, Cumberland, and of Mrs. Macdonald, Eversley, Victoria Park, Manchester.

DEATHS.

FOWLER.—At 21, Warriston Crescent, Edinburgh, on the 14th inst., Harry Fowler, M.B., C.M., youngest son of the late James Stewart Fowler, M.D.

GRANT.—Killed in action on October 11th, George Leonard Grant, B.A., M.R.C.S., L.R.C.P., temporary Captain R.A.M.C., only son of Dr. and Mrs. Leonard Grant, New Southgate, aged 25.

PROCTER.—On October 17th, at The Croft, Great Bookham, Surrey, William James Procter, beloved husband of Lal Procter, of Addison's disease. No flowers, by request.

DIARY FOR THE WEEK.

MONDAY.

MEDICAL SOCIETY OF LONDON, 11, Chandos Street, W.—Discussion on Gunshot Wounds of the Peripheral Nerves will be introduced—the Medical Aspect by Dr. Wilfred Harris and the Surgical by Mr. Wilfred Trotter, to be followed by Sir F. Eve, Dr. F. Buzzard, Mr. J. Swan, and Mr. P. B. Roth.

ROYAL COLLEGE OF SURGEONS, Lincoln's Inn Fields, W.C., 5 p.m.—Demonstration by Mr. Shattock: Foreign Bodies.

WEDNESDAY.

HUNTERIAN SOCIETY, 1, Wimpole Street, W., 9 p.m.—President's Address by Dr. W. H. Kelson: Diseases of the Throat, Nose, and Ear, and their Treatment in Hunter's Time.

ROYAL COLLEGE OF SURGEONS, Lincoln's Inn Fields, W.C., 5.30 p.m.—Mr. J. F. Colyer: Irregularities of the Teeth in Man.

THURSDAY.

ROYAL SOCIETY OF MEDICINE:

SECTION OF NEUROLOGY, 8.30 p.m.—Presidential Address by Dr. James Taylor: The Ophthalmological Observations of Hughlings Jackson and their Bearing on Nervous and other Diseases.

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